WASHINGTON:

5 MAR 1949

MEMORANDUM FOR REAR ADMIRAL ROSCOE HILLENKOETTER DIRECTOR OF CENTRAL INTELLIGENCE

SUBJECT:

Medical Intelligence

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I understand that the question of establishing in the Central Intelligence Agency a medical intelligence unit comprising officers designated by the Armed Services will shortly be considered by the Intelligence Advisory Committee. Inasmuch as this question originated from certain actions taken by this office, I would like to bring my views to your attention, with the request they they be considered by the Intelligence Advisory Committee when it meets on this matter.

On 3 September 1948, the Committee on Medical and Hospital Services of the Armed Forces (Hawley Committee) recommended to me the creation of an Armed Forces Medical Intelligence Organization. This recommendation was endorsed by the Secretaries of the Army, Navy and Air Force. I therefore referred the Hawley Committee recommendations to the nawly created Medical Advisory Committee of which Mr. Charles Cooper is Chairman.

After a series of discussions between Mr. Cooper, members of his Committee, yourself and members of my staff, it seemed that in place of the type of organization recommended by the Hawley Committee, it would be preferable for each one of the Service intelligence agencies, in consultation with the respective senior Service medical officer, to assign a medical officer to the Centre? Intelligence Agency. The three medical officers so assigned would become part of the Office of Scientific Intelligence. This proposal was discussed with the freads of the Service intelligence agencies who indicated their general concurrence therein, subject to working out the necessary details and the precise definition of functions of the proposed medical intelligence unit. I understand that it is now felt that further discussions with a view to arriving at an agreement can be best carried on through the medium of the Intelligence Advisory Committee.

I would like to emphasize the importance of providing medical intelligence with the stimulus it needs through its close association with the owner intelligence activities carried on by the Central Intelligence Agency and the strengthening and effective coordination of the separate Service efforts.

In my view, the proposed medical intelligence unit in the Central Intelligence Agency would contribute to these objectives by performing the following functions:

- Stimulate and guide the program for the collection of current scientific medical intelligence information.
- Evaluate the information received and produce current and (b) staff intelligence therefrom for the benefit of the various intelligence agencies.

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- (c) Assemble and transmit from Central Entelligence Agency sources information required by the medical intelligence officers of the respective Services.
- (d) Be responsible for the regular and frequent briefing of their respective intelligence agencies on all scientific medical matters of current importance.

Agency would be working in close touch with related scientific intelligence activity, and the value of their work would be enhanced by this relationship. They would also be well placed to guide and to draw upon the facilities of the Central Intelligence Agency and the other intelligence agencies. Although these officers would be, operationally and administratively, a part of the Central Intelligence Agency, they should remain in close touch with their respective Services in order to be responsive to the needs of the Services and to assist them in any manner possible. The Services would continue to perform medical intelligence activity peculiar to their requirements and maintain the staff necessary to carry out these responsibilities and handle the necessary relationship with the Central Intelligence Agency.

I would appreciate it if you would bring these views to the attention of the Intelligence Advisory Committee and express to the Committee my hope that agreement on a program of medical intelligence may be promptly achieved.

James Forrestal